**SEC** 1972 (6/99) Potential persons who are to respond to the collect contained in this form are not required to respond unless in displays a currently valid OMB control number.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

] (	JMB API	PROVAL
OM	B Numbe	r: 3235-007

Expires: May 31, 2002 Estimated average burden hours per response... 1

SEC USE ONLY					
Prefix Serial					
DATE RECEI	VED				

Name of Offering (check if this is an amendment and name has changed) and offering (check if this is an amendment and name has changed)

Filing Under (Check box(es) that [] Rule 505 [x] } ection 4(6) []ULOE [ ] Rule 504 apply): **PROCESSED** Type of Filing: [x] New Filing [] Amendment JUN 0 7 2002 A. BASIC IDENTIFICATION DATA THOMSON FINANCIAL 1. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Gastar Exploration, Ltd.

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number

2480 W. Campus Drive, Bldg. C, Mt. Pleasant, MI 48858

(989) 773-7050

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (if different from Executive Offices)

Same	•
Brief Description of Busin	ess: Oil and Gas Exploration & Development
Type of Business Organiz	ation
[x] corporation	[ ] limited partnership, already formed [ ] other (please specify
[ ] business trust	[ ] limited partnership, to be formed
	Month Year
Actual or Estimated Date	of Incorporation or Organization: [0][5][8][7] [x] Actual [] Estimate
Jurisdiction of Incorporation	n or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: (CN for Canada; FN for other foreign jurisdiction) [C][N]

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
   Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  3. Each executive officer and director of corporate issuers and of corporate general and
- managing partners of partnership issuers; and
- 4. Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[ ] Promoter [ x ] Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam	ne first, if individual): GeoStar Co	orporation		<del></del>
Business or Residen	ce Address (Number and Street	, City, State, Zip Cod	e)	,
2480 W. Campus Dr	ive, Bldg. C, Mt. Pleasant, MI 48	3858		
Check Box(es) that Apply:	[ ] Promoter [ x ] Beneficial Owner	[ x ] Executive Officer	[x] Director [	General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Parrott, Johr	י W. ַ		
Business or Residen	ce Address (Number and Street	, City, State, Zip Cod	e)	
2480 W. Campus Dr	ive, Bldg. C, Mt. Pleasant, MI 48	8858		
Check Box(es) that Apply:	[ ] Promoter [ x ] Beneficial Owner	[x] Executive Officer	[x] Director [	General and/or Managing Partner
Full Name (Last nam	ne first, if individual): Robinson,	Thomas		<del></del>
Business or Residen	ce Address (Number and Street	, City, State, Zip Cod	e)	
2480 W. Campus Dr	ive, Bldg. C, Mt. Pleasant, MI 48	8858		
Check Box(es) that Apply:	[ ] Promoter [ x ] Beneficial Owner	[ x ] Executive Officer	[ ] Director [	General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Ferguson,	Tony		
Business or Resider	ice Address (Number and Street	, City, State, Zip Cod	le)	
2480 W. Campus Dr	rive, Bldg. C, Mt. Pleasant, MI 48	8858		

Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ x ] Executive Officer	[ ] Director [ ] General and/or Managing Partner
Full Name (Last nam	e first, if individual): Lambert, F	rederick J.	
Business or Residen	ce Address (Number and Street	, City, State, Zip Coo	le)
2480 W. Campus Dri	ive, Bldg. C, Mt. Pleasant, MI 4	8858	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ x ] Executive Officer	[ ] Director [ ] General and/or Managing Partner
Full Name (Last nam	e first, if individual): Porter, J. R	ussell	· · · · · · · · · · · · · · · · · · ·
Business or Residen	ce Address (Number and Street	t, City, State, Zip Cod	de)
2480 W. Campus Dr	ive, Bldg. C, Mt. Pleasant, MI 4	8858	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ x ] Executive Officer	[ ] Director [ ] General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Hughes, Vid	stor	
Business or Residen	ce Address (Number and Street	t, City, State, Zip Coo	de)
2480 W. Campus Dr Check Box(es) that Apply:	ive, Bldg. C, Mt. Pleasant, MI 4 [] Promoter [] Beneficial Owner	8858 [ x ] Executive Officer	[ ] Director [ ] General and/or Managing Partner
Full Name (Last nam	ne first, if individual): Sirey, Sara	a-Lane	
Business or Residen	ce Address (Number and Street	t, City, State, Zip Cod	de)
2480 W. Campus Dr	ive, Bldg. C, Mt. Pleasant, MI 4	8858	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[] Executive Officer	[ x ] Director [ ] General and/o Managing Partner
Full Name (Last nam	ne first, if individual): Heysel, Ma	atthew	
Business or Residen	ce Address (Number and Stree	t, City, State, Zip Cod	de)
2480 W. Campus Dr	ive, Bldg. C, Mt. Pleasant, MI 4	8858	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[] Executive Officer	[x] Director [] General and/or Managing Partner

Business or Residence Address (Number and Street, City, State, Zip Code)		
2480 W. Campus Drive, Bldg. C, Mt. Pleasant, MI 48858		
Check Box(es) that [x] Promoter[] Beneficial [] Executive [] Director [ Apply: Owner Officer	] General Managii Partner	
Full Name Last name first, if individual): The Private Consulting Group, Inc.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
650 SW Macadam, Suite 400, Portland, OR 97201		
B. INFORMATION ABOUT OFFERING		
I. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	N [
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?	\$ 25,	000
Does the offering permit joint ownership of a single unit?	Yes	N
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers expression with soles of socurities in the offering. If a person to be listed is an accepiated	[ x ]	l
	in s,	l
directly or indirectly, any commission or similar remuneration for solicitation of purchasers connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states ist the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	in s,	l
directly or indirectly, any commission or similar remuneration for solicitation of purchasers connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states ist the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)	in s,	l
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directly or indirectly, any commission or similar remuneration for solicitation of purchasers connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states ist the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  The Private Consulting Group  Business or Residence Address (Number and Street, City, State, Zip Code)	in s,	l
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directly or indirectly, any commission or similar remuneration for solicitation of purchasers connection with sales of securities in the offering. If a person to be listed is an associated berson or agent of a broker or dealer registered with the SEC and/or with a state or states ist the name of the broker or dealer. If more than five (5) persons to be listed are associated bersons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  The Private Consulting Group  Business or Residence Address (Number and Street, City, State, Zip Code)  4650 SW Macadam Ave., Ste. 400 Portland OR 97301  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	in ied	

\* \* \*

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering
and the total amount already sold. Enter "0" if answer is "none" or "zero."
If the transaction is an exchange offering, check this box " and indicate in
the columns below the amounts of the securities offered for exchange
and already exchanged.

and anoday analistic		
Type of Security Debt Equity	Aggregate Offering Price \$ \$	Amount Already Sold \$\$
[ ] Common [ ] Preferred	Ψ	<b>5</b>
Convertible Securities (including warrants)  Partnership Interests  Other (Specify).  Total  Answer also in Appendix, Column 3, if filing under ULOE.	\$ 40,000,000 \$ \$ \$ \$ 40,000,000	\$ 3,100,000 \$\$ \$ 3,100,000
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
Accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.	Number Investors 3 0	Aggregate Dollar Amount of Purchases \$ 3,100,000 \$ 0
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering Rule 505 Regulation A Rule 504 Total	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be

given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	
Transfer Agent's Fees	[ ] \$
Printing and Engraving Costs	[x]\$ 600,000.00
Legal Fees	[x]\$ 400,000.00
Accounting Fees	[x]\$ 240,000.00
Engineering Fees	[x]\$ 300,000.00
Sales Commissions (specify finders' fees separately)	[x]\$ 4,000,000.00
Other Expenses (identify) Toronto Stock Exchange share issuance fees	[x]\$ 87,000.00
Total	[x]\$5,627,000.00
· ·	[ x ] \$ 3,027,000.00
<ul> <li>b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."</li> <li>5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.</li> </ul>	
Salaries and fees	Payments to Officers, Payments Directors, & To Affiliates Others [X] [X] \$1,000,000 \$800,000
Purchase of real estate	[] [] \$
Purchase, rental or leasing and installation of machinery and equipment	[X] [X] \$2,000,000 \$2,000,000
Construction or leasing of plant buildings and facilities	[]· [] \$ \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[] [] \$\$
Repayment of indebtedness	[] \$ \$
Working capital	[x] [x] \$24,573,000 \$4,000,000
Other (specify):	[]
	\$\$
Column Totals	[X] [X] [X] \$27,573,000 \$6,800,000
Total Payments Listed (column totals added)	[x] <u>\$34,373,000</u>
D. FEDERAL SIGNATURE	

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Signature

Gastar Exploration, Ltd.

Name of Signer (Print or Type)

John W. Parrott

Date

Signature

Title of Signer (Print or Type)

Director

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

### E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

.....

Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Signature

Gastar Exploration, Ltd.

Name of Signer (Print or Type)

John W. Parrott

Signature

Si

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	Intend to no accred investo Stat (Part B-I	n- lited rs in e	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		Type of security and aggregate ffering price ered in state   Type of investor and amount purchased in State waiver  (Part C. Item 2)		5 Disqualir under ULC (if yes, explana waiver g (Part E-	State DE attach tion of ranted)
State	Yes	No		Number of Accredited Investors		Number of Non- Accredited Investors	Amount	Yes	No
AL	——————————————————————————————————————	x	Convertible \$40,000,000			0			×
AK		х	Convertible \$40,000,000			0		and the first of t	х
AZ		х	Convertible \$40,000,000			0			x
AR		х	Convertible \$40,000,000			0			x
СА		x	Convertible \$40,000,000			0			×
СО		х	Convertible \$40,000,000			0			×
СТ		х	Convertible S40,000,000			0			×
DE		x	Convertible \$40,000,000			0			×
DC		X	Convertible \$40,000,000	į	Committee of Commi	0			×
FL		X	Convertible \$40,000,000	3	\$3,100,000	0			×
GA		X	Convertible \$40,000,000		1	0	,		×
HI		, X	Convertible \$40,000,000			0			x
ID		. X	Convertible S40,000,000			0			×
, IL		X	Convertible S40,000,000			0			×
IN		x	Convertible S40,000,000			0			×
IA		X	Convertible			0			X

		\$40,000,000		
KS	x	Convertible \$40,000,000	0	X
KY	X	Convertible \$40,000,000	0	X
LA	x	Convertible \$40,000,000	0	x
ME	х	Convertible \$40,000,000	0	х
MD	х	Convertible \$40,000,000	. 0	х
MA	x	Convertible \$40,000,000	0	х
MI	×	Convertible \$40,000,000	0	x
MN	х	Convertible \$40,000,000	0	х
MS	х .	Convertible \$40,000,000	0	х
МО	Х	Convertible \$40,000,000	0	x
МТ	X	Convertible \$40,000,000	0	X
NE	×	Convertible \$40,000,000	0	x
NV	X	Convertible \$40,000,000	0	x
NH	x	Convertible \$40,000,000	0	x
NJ	Х	Convertible \$40,000,000	0	X
NM	X	Convertible \$40,000,000	0	X
NY	X	Convertible \$40,000,000	0	x
NC .	X	Convertible \$40,000,000	0	X
ND :	, X	Convertible \$40,000,000	0	X
ОН	X	Convertible \$40,000,000	0	X
ок	X	Convertible \$40,000,000	0	X
OR	x	Convertible \$40,000,000	0	, x
РА	X	Convertible \$40,000,000	0	X
RI	X	Convertible \$40,000,000	0	x

sc	×	Convertible \$40,000,000	0	x
SD	×	Convertible \$40,000,000	0	x
TN	x	Convertible \$40,000,000	0	x
ТХ	x	Convertible \$40,000,000	0	X
UT	x	Convertible \$40,000,000	0	х
VT	×	Convertible \$40,000,000	0	х
VA	x	Convertible \$40,000,000	0	х
WA	x	Convertible \$40,000,000	0	х
wv	x	Convertible \$40,000,000	0	Х
WI	x	Convertible \$40,000,000	0	X.
WY	X	Convertible \$40,000,000	0	X
PR	×	Convertible \$40,000,000	0	X

http://www.sec.gov/divisions/corpfin/forms/d.htm Last update: 08/27/1999